



(Check all that apply.)

Change purpose(s) of use

APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

C34-29646P

FOR OFFICE USE ONLY

CHANGE No. Chel-10-02 WRIA

Add purpose(s) of use Change point(s) of diversion/withdrawal Add point(s) of diversion/withdrawal Change/transfer place of use	DATE ACCEP	TED 1 0	10 BY 10			
Other (i.e. consolidation, intertie, trust water)	CHECK No.	1083	07-13-2010			
Explain: modify season of use; change water right, pu	rsuant to	0)				
Basin reservation, WAC 173-546-050.	ECY Coding:	001-002-WR1028	5-000011			
to remove provision regarding interruption of water use based on base flows.	SEPA: DE	xempt 🚨 Not	exempt			
interruption of water use based on base nows.						
IF MORE SPACE IS NEEDED, ATTACH ADD	ITIONAL SHEETS (PLEAS	E PRINT OR TYP	PE CLEARLY)			
1. Applicant Information:						
APPLICANT/BUSINESS NAME	PHONE NO.	and the second second	X NO.			
James R. Cannon	(509) 68	2-6/61 ()			
ADDRESS 7940 Entiat River Road						
CITY	STATE	715	CODE			
Entiat	WA	The second secon	3822			
CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FA	X NO.			
Mary McCrea	(509) 996	-4121 ()			
ADDRESS						
P.O. Box 850						
CITY	STATE		CODE			
Winthrop	WA	98	3862			
2. Water Right Information:						
WATER RIGHT OR CLAIM NUMBER	RECORDED NAME(S)					
S4-29646P		olph N. Cannon and James R. Cannon				
DO YOU OWN THE RIGHT TO BE CHANGED? ☐ YES ☐ NO						
IF NO, PROVIDE OWNER(S) NAME and ADDRESS: Note: Randersonal Representative of the Estate of Randersonal Representative is enclosed	olph Cannon. A cop	y of the appoi				
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST F	IVE (5) YEARS? XYES	□ NO				
Please attach copies of any documentation that den was established. Also, if you have a water system papplication.						
CHEL-10-02 C54-29						
FOR OFFIC	CE USE ONLY					
APP, NO. PERMIT NO. CER	RT. NO. CER	T. OF CHANGE	NO.			

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Entiat River		SW	SW	28	26N	20E		1 4 4 1 1 1 h
							And the second s	
			0.5					

B. Proposed

Cannon

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Well #1	1	NW	SE	33	26N	20E	262033420050	none
Well #2	2	NW	NE	33	26N	20E	262033130100	ABX 237
DO YOU OWN THE EXISTING	NID PROPOS						262033130100	ABX 237

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

0.22 053

A. Existing

	ACRE-FT/YR	PERIOD OF USE
98.08 gpm	26.0	April 15-Oct 15

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigation	98.08 gpm	26.0	April 1-Oct 31

5. Place of Use:

OF 4/4	05 4/4		EGAL DESC	RIPTION OF	LANDS WHERE WATER IS PRI	SENTLY USED:	
		NW 1/4;					
SW 1/4	SW 1/4	NE 1/4;					
N 1/2 N	W 1/4	SE 1/4:					
			ection 33	T 26N	R 20E.W.M.		
7 4 17 1	OL 1/4	, all ill oc	2011011 00	, 1. 2014,	TY ZOL. V.IVI.		
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
1/4	1/4	SEC.	тwр.	RGE.	County Chelan	PARCEL#	# OF ACRES
1/4	1/4					PARCEL#	
1/4	7/4				Chelan		10
			26	20	Chelan	PARCEL #	10

B. Proposed

			LEGAL DE	SCRIPTION	OF LANDS WHERE NEW USE IS	PROPOSED:	
NE1/4	NW1/4,	south of	the Entia	at River;	NE1/4NE1/4 SE1/4 NV	V1/4;	
W1/2 N	E1/4;						
N1/2 S	E1/4, we	est of En	tiat River				
E2/3 N	2/3 SW	1/4 SE1/4	, west o	f Entiat F	River		
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
		33	26	20	Chelan		85

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map. Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER? ☑ YES ☐ NO - IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): See Exhibit 1 to Attachment A. James Cannon is also filing an Application for a new water right from the Entiat Basin reserve for the irrigation of 3.2 acres. These acres are included in the 85 acre total. 6. Remarks and Other Relevant Information: Location of Cannon-Anderson POD: 750 feet north and 550 feet east from the southwest corner of Section 28. Location of Well #1: 1800 feet west and 40 feet south of the east quarter corner of Section 33. Location of Well #2: 2657 feet west and 1032 feet south from the NE corner of Section 33. See Attachments A and B. IF FOR SEASONAL OR TEMPORARY, START DATE __/___ END DATE __/__ Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. 7. Signatures: I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me. (Date) (Date) (Land Owner(s) of Existing Place of Use) (Date) IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE. WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): ☐ APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE ☐ ADDITIONAL SIGNATURES REQUIRED □ SECTION _____ IS INCOMPLETE

______ DATE: ____/____

□ OTHER/EXPLANATION:_

DO YOU OWN ALL THE LANDS IN THE PROPOSED PLACE OF USE? YES NO – IF NO, PROVIDE OWNER(S) NAME: James Cannon and Estate of Randolph Cannon
Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point for diversion/withdrawal, place of use and any other features involved with this application. If platted proper blease include a certified copy of the plat map.
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(Applicant) June R. June (Date)
(Water Right Holder) James R. Camp (6 124) 10 (Date)
(Land Owner(s) of Existing Place of Use) June Rawleyh N. Cauna
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☐ ADDITIONAL SIGNATURES REQUIRED ☐ SECTION IS INCOMPLETE
OTHER/EXPLANATION:

___ DATE: __/__/

STAFF: __